Approved, SCAO OSM CODE: NCT

STATE OF MICHIGAN

PROBATE COURT COUNTY OF		CREDITORS it's Estate		
Estate of		Date of birth:		
TO ALL CREDITORS: *				
NOTICE TO CREDITORS: The dece	edent,		, who lived at	
Street address		City	, Michigan	
died		S.i.,		
Date Creditors of the decedent are notified	that all claims against th	e estate will be forever ba	urred unless presented to	
	-		·	
		, named personal r	epresentative or proposed personal	
representative, or to both the probate	court at		City	
and the named/proposed personal rep		nths after the date of publ	•	
		Date	<u> </u>	
Attorney name (type or print)	Bar no.	Personal representative nam	e (type or print)	
Address		Address		
City, state, zip	Telephone no.	City, state, zip	Telephone no.	
	PUBLISH ABOVE I	NFORMATION ONLY		
Publish time(s) in Nar	ne of publication	in	County	
Furnish copies to				
Furnish affidavit of publication to the p	probate court with copy to	·		
Forward statement for publication cha	rges to			
*NOTE TO PREPARER: If there is a kinsert "including [name of creditor] who			not be ascertained after diligent inquiry,	

Do not write below this line - For court use only